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Should AHB join the armed forces?

June 1943

FIRST CLASS MAIL FIRST

THE ART MUSEUM PRINCETON UNIVERSITY PRINCETON, NEW JERSEY 08544

Princeton

Mrs. Alfred B[illegible],
New York, New York.

Dear Mr. Barr:

Your letter of 25 June 1943 to Major E. E. Fogelson has been referred to me for reply.

Since you state that your experience has not been in the field of administration and has not included preservation of works of art, etc, it would appear that you are correct in assuming that it would not be wise to make application for an appointment in the Military Government program.

Your interest in this work is appreciated.

Very truly yours,

John N. Hayes

John N. Hayes,
Major, C.M.P.,
Military Government Division.

Copy of this letter was sent to Major Crawford. Don't know Major C. said he wished to consult Colonel X before giving us his opinion. I did not hear



24-25544

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WAR DEPARTMENT
ARMY SERVICE FORCES
OFFICE OF THE PROVOST MARSHAL GENERAL
WASHINGTON

28 June 1943

4 copies
2 = Major Provost & Crawford
Rm 4100
5D Bldg
2 =

6/29

Mr. Alfred H. Barr, Jr., Director,
The Museum of Modern Art,
11 West 53rd Street,
New York, New York.

Dear Mr. Barr:

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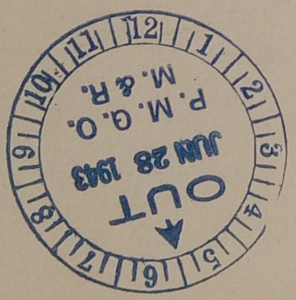
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Jean Hugo C. for about ten days. When on the phone he said the Colonel had confirmed his opinion that I should not apply at the present time

A. H. B.



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4 copies of same letter

June 25, 1943

Dear Major Fogelson:

At the suggestion of Major Robert L. Crawford of the New York Officer Procurement District I am writing you for information which he believes you may be able to give me.

At Major Crawford's request I went to his office on June 19th. He told me that my name had been proposed as a candidate for a commission in the Military Government Division (Civil Administration) as a staff officer responsible for the administration and protection of museums, works of art, archives, etc. in occupied territories.

After talking over the matter Major Crawford advised me not to make application until I had secured more precise information than he could give me. His advice was confirmed by Francis Henry Taylor, Director of the Metropolitan Museum.

So far as I can find out my name was submitted in a list of directors of the larger museums on the sound theory that such men would have had considerable executive experience in administration and public relations (qualifications which Major Crawford had previously emphasized).

My position and experience are however exceptional among American museum directors in two ways: 1) my responsibilities are primarily concerned not with administrative organization which is in charge of another

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Naturally if it appears that I can really be more useful in the Army than in civilian life I am very willing to apply. But if there has been some initial misunderstanding about my capacities I hesitate to waste the Army's time in making an elaborate routine examination.

I would be most appreciative of your help.

Sincerely,

Major E. E. Fogelson
Military Government Division
2074 Munitions Building
Washington, D. C.

AHB:mc

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more useful in the army than ~~in a~~ civilian life

Naturally if it appears that I can really be ~~useful~~ I am very willing to apply.

But if there has been some initial misunderstanding about my capacities

I hesitate to waste the Army's time in making an elaborate routine examination.

~~With many thanks for your help~~

I would be most appreciative

of your help

Sincerely

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Army

Dear Major Fozelova

At the ~~suggestion~~ request of Major Robert L. Crawford of the New York Office Procurement ~~District~~ I am writing you for information which he believes you may be able to give me.

At Major Crawfords request I went to his office ~~(June 19)~~ on June 19th. He ~~told me that~~ ~~asked me~~ told me that my name had been proposed as a candidate for a commission in the

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~~Civil Administration section office section (3),~~

The Military Government Division
(Civil Administration) ~~function~~
~~in a special capacity~~ monuments
as a staff officer responsible for
the administration and protection of
~~Fine~~ museums, works of art, archives etc.
in occupied territories

~~on the matter~~ Major Crawford
after ~~calling~~ ~~discussion~~ ~~he advised~~
me not to make ~~any~~ application
until I had ~~made~~ secured more
precise information ~~that~~ ~~I should~~ ~~the~~
~~Army~~ Then he ~~had~~ ~~a card~~
~~sent~~ his advice was
confirmed by ~~Director Taylor~~ F. H. Taylor
~~I was assistant to the present~~
director of the Metropolitan Museum,
~~the matter to me~~
So far as ~~I can hear~~ find out ~~other~~
~~I have received that my~~
~~of time to Major Crawford in the~~ in a list
name was submitted ~~which~~
~~of the~~ directors of the larger ~~museums~~
~~assistant~~ museums on the
sound theory that such men would have
had considerable ~~administrative~~
executive experience in ~~the~~
~~and technical~~ ~~field of~~ administration

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and public relations ? (qualifications which Major Crawford had previously emphasized).

My position and experience as Assistant Director has been an asset among museum officials in two ways: 1) my responsibilities are primarily concerned with maintaining a balance and unity in standards between the various departments of the organization which is in charge of another member of our staff. 2) I am a specialist in modern art writing, research, buying, exhibiting — without ordinary museum experience in the preservation of antiquities etc.

Now these are my questions:

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my ~~with~~ within special knowledge and experience ~~I~~ are considered valuable ~~by~~ by the M. G. D. authorities?

2. If ~~I am~~ not, would you advise me to apply for a commission anyway?

If ~~my services~~ Naturally ~~should~~ ~~I can be of service~~ it ~~it~~ appears that I can really be useful ~~I am~~ I am willing to apply. But if there has been some initial misunderstanding ~~misapprehension~~ about my capacities I hesitate to waste the Army's time in making ~~the~~ an elaborate routine examination.

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for Crawford

1. Coleman Miss Stofosky

2. Taylor

Col. Jere Miller ? address —
phone —

Gen. Wickersham's division

3. Rank ?

Military Government Div. Civil Affairs
Provost Marshal E.E. Fogelson
Mrs. Adelaide Hawes 2074 Phone

Request to go
Talk with me
Information available Dec. Rep. 6 700
Jan 19 79287

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WITHDRAWAL

_____
Date

I _____ for reasons stated below, wish to withdraw my application for a temporary commission in the Army of the United States.

_____
Signature

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WAR DEPARTMENT

HEADQUARTERS SECOND SERVICE COMMAND
ARMY SERVICE FORCES
NEW YORK OFFICER PROCUREMENT DISTRICT
50 BROADWAY
NEW YORK, N. Y.

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, $300

HEADQUARTERS SECOND SERVICE COMMAND
ARMY SERVICE FORCES
NEW YORK OFFICER PROCUREMENT DISTRICT
50 BROADWAY
NEW YORK, N. Y.

Att: Major R.L.Crawford

2. To be qualified, a civilian must possess some specialized ability which the Army needs and cannot readily procure from the Officer Candidate Schools or from the ranks. Relatively few applicants meet these requirements.

3. To be eligible, an applicant without prior commissioned service must have attained his 38th birthday, unless classified by Selective Service as class IV-D, or class IV-F on account of physical disability. Exception to this general rule may be made in the case of doctors, dentists, and veterinarians, and in other cases where there is an authoritatively determined critical need for the services of a particular individual, or where an individual's specialized ability is within a "scarce category" defined in War Department Orders.

4. Former commissioned officers of any component of the Army of the United States, Navy, Marine Corps, or Coast Guard, if qualified and otherwise eligible, will be considered even though under 38 years of age.

5. No appointment in any case will be made if the candidate is:

a. In class I-A and his induction has been ordered;
b. In class II-A, II-B, or II-C, unless authoritatively released;
c. In class I-A0 or IV-E;
d. Over 60 years of age;
e. An alien, except a citizen of a co-belligerent or a friendly country who otherwise possesses the same qualifications as a citizen of the United States;
f. An employee of any federal government department or agency, without the written consent of an authorized official thereof; or
g. On the Active or Reserve List of the Navy, Marine Corps, Coast Guard, Coast and Geodetic Survey, or Public Health Service (except a PHS Reserve Officer having permission to resign without prejudice).

(OVER)

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WAR DEPARTMENT
ARMY SERVICE FORCES
SECOND SERVICE COMMAND
OFFICER PROCUREMENT SERVICE

INFORMATION CONCERNING THE APPOINTMENT OF CIVILIANS AS OFFICERS IN THE ARMY OF THE UNITED STATES

1. The Officer Procurement Service is the sole agency for the procurement of civilian candidates for direct appointment as officers in the Army of the United States. Through District Offices in each Service Command, it receives applications from eligible candidates and determines the qualifications of applicants to perform various types of specialized services as Army officers, on the basis of specifications prescribed by the War Department. Acceptable candidates are selected by higher authority for appointment at the rate needed and to fill specific needs only.

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6. Apparently qualified and eligible candidates are given application forms to fill out and return. Action thereon is as follows:

a. Those who seem qualified for consideration to fill current needs are requested to report for formal interview.
b. Those who appear qualified for consideration to fill possible future needs are informed that their applications will be classified and held in suspense.
c. Others are notified of the reasons why further consideration is not contemplated.

7. The use of forms, often mimeographed on inexpensive paper, is necessitated by the need for prompt action and by the Army's consideration for the burdens of the taxpayer, and is not to be considered as indicating a lack of courtesy or personal attention.

8. Instructions must be carefully followed and all forms completed fully and accurately. Omission or misrepresentation of material facts may invalidate an appointment. Any restrictions placed by an applicant, either at the interview or in the completed forms, on the rank acceptable, the date of availability for service, etc., may reduce the chances of recommendation or ultimate appointment. Applicants not willing to serve wherever needed will not be recommended.

9. Any expense incident to an applicant's dealings with this office will be paid by him, there being no provision for reimbursement by the government. This includes any travel to or from this office or an Army Dispensary for physical examination. No charge is made for an authorized physical examination at an Army Dispensary.

10. Each applicant is particularly requested not to make inquiry of this or any other War Department office by letter, telephone, or otherwise. When further action is required on his part, he will be notified. Effort to exercise personal or political influence will not aid in obtaining appointment.

11. It should be clearly understood by every applicant that no officer of the Officer Procurement Service has authority to offer a candidate an appointment. No officer of this or any other component of the Army of the United States has authority to promise that an appointment will be offered.

12. LOCATION OF DISTRICT OFFICES IN THE SECOND SERVICE COMMAND:

New York Officer Procurement District - 50 Broadway, New York, N. Y.

Albany Officer Procurement District - 90 State Street, Albany, New York

Syracuse Officer Procurement District - 218 Harrison Street, Syracuse, New York

Buffalo Officer Procurement District - 290 Main Street, Buffalo, New York

OPS-46
Revised 2nd Serv. C.
12 June 1943

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HEADQUARTERS SECOND SERVICE COMMAND
ARMY SERVICE FORCES
~~GOVERNORS ISLAND, NEW YORK~~

In reply refer to:
New York Officer
Procurement District,
50 Broadway, New York, N.Y.

ROBERT L. CRAWFORD
Major, A. G. D.
Room # 5200
HAN ext 774
Room 400
50 Bway

Dear Sir:

~~Reference is made to your recent communication~~. Inclosed is a Personnel Placement Questionnaire and General Information Sheet relative to appointment in the Army of the United States.

It is requested that you read carefully the inclosed information sheet and, if you possess the general qualifications, that you complete the questionnaire in duplicate, fully and completely, and return it to this office in the envelope provided, which requires no postage. A passport-size photo with your name and the date taken inscribed on the back should be attached to each copy. You may also attach any further papers which you may wish with reference to your application.

On receipt, your qualifications will be carefully reviewed by an Officers Selection Board. If it appears that your particular training and experience qualifies you for an existing vacancy, you will be notified and furnished all necessary information.

YOU ARE PARTICULARLY REQUESTED TO MAKE NO INQUIRY BY TELEPHONE OR LETTER TO THIS OR ANY OTHER WAR DEPARTMENT OFFICE RELATIVE TO THE POSSIBILITY OF YOUR SERVICES BEING USED. You will be notified as soon as practicable of any action taken.

Very truly yours,

Francis L. Blewer

FRANCIS L. BLEWER,
Captain, A. G. D.

Inclosures
WD AGO Form 0850 (dup)
Information Sheet
Return Envelope
~~Letter of Inq.~~
Reference Sheet
OPB-1
Rev. 4/29/43

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g. On the Active or Reserve List of the Navy, Marine Corps, Coast Guard, Coast and Geodetic Survey, or Public Health Service (except a PHS Reserve Officer having permission to resign without prejudice).

(OVER)

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6. Apparently qualified and eligible candidates are given application forms to fill out and return. Action thereon is as follows:

a. Those who seem qualified for consideration to fill current needs are requested to report for formal interview.
b. Those who appear qualified for consideration to fill possible future needs are informed that their applications will be classified and held in suspense.
c. Others are notified of the reasons why further consideration is not contemplated.

7. The use of forms, often mimeographed on inexpensive paper, is necessitated by the need for prompt action and by the Army's consideration for the burdens of the taxpayer, and is not to be considered as indicating a lack of courtesy or personal attention.

8. Instructions must be carefully followed and all forms completed fully and accurately. Omission or misrepresentation of material facts may invalidate an appointment. Any restrictions placed by an applicant, either at the interview or in the completed forms, on the rank acceptable, the date of availability for service, etc., may reduce the chances of recommendation or ultimate appointment. Applicants not willing to serve wherever needed will not be recommended.

9. Any expense incident to an applicant's dealings with this office will be paid by him, there being no provision for reimbursement by the government. This includes any travel to or from this office or an Army Dispensary for physical examination. No charge is made for an authorized physical examination at an Army Dispensary.

10. Each applicant is particularly requested not to make inquiry of this or any other War Department office by letter, telephone, or otherwise. When further action is required on his part, he will be notified. Effort to exercise personal or political influence will not aid in obtaining appointment.

11. It should be clearly understood by every applicant that no officer of the Officer Procurement Service has authority to offer a candidate an appointment. No officer of this or any other component of the Army of the United States has authority to promise that an appointment will be offered.

12. LOCATION OF DISTRICT OFFICES IN THE SECOND SERVICE COMMAND:

New York Officer Procurement District - 50 Broadway, New York, N. Y.

Albany Officer Procurement District - 90 State Street, Albany, New York

Syracuse Officer Procurement District - 218 Harrison Street, Syracuse, New York

Buffalo Officer Procurement District - 290 Main Street, Buffalo, New York

OPS-46
Revised 2nd Serv. C.
12 June 1943

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PERSONNEL PLACEMENT QUESTIONNAIRE

RATING

Detailed answers should be made as the action taken by the War Department will depend upon the completeness of the information furnished.

Where more space is needed, attach additional sheets.

If practicable, attach a recent photograph showing on back thereof date it was made

(Print or type answers to questions.) Boxes in broken lines for use of War Department only

_____ (Date of application)

1. Name _____ (Last) (First) (Middle)

   Army serial No. (if any) _____

   Mailing address _____ (Number) (Street) (City) (State)

   Legal or voting residence _____ (State) (County)

   Person to be notified in case of emergency:

   Name _____ Relationship _____

   Address _____

2. (*a*) Birth _____ (Date) (Place: State or name of country at time of birth)

   (*b*) Age last birthday _____

3. (*a*) Parental nativity: Country of mother's birth _____

   Country of father's birth _____

   (*b*) If married, country of wife's birth _____

4. State whether or not you are a citizen of the United States and whether by birth or naturalization. (If the latter, append evidence of naturalization. or if evidence not available, state on what date and in what court naturalized.) _____

5. Marital status (indicate by "X"): Single _____ Married _____ Separated _____ Divorced _____ Widowed _____

6. Dependents (number completely dependent on you other than wife) _____

7. Race: White _____ Negro _____ Indian _____ Other (specify) _____

8. In what fields and in what capacity do you consider that you could be of special service to the Government? (List in order of ability.)

FIELD	REASONS

9. (*a*) Chronological statement of service in the Army, Navy, Marine Corps, including service as a cadet at U. S. Military or Naval Academy, National Naval Volunteers, National Guard in Federal service, as a Reserve officer on active duty, or at military training camps, or as a contract surgeon serving full time, or as a student in the C. M. T. C. or R. O. T. C., Basic Course, Advanced Course, and Advanced Course camp, giving inclusive dates for each day, month, and year, if practicable, from your personal records. Do *not* write to War Department for exact data.

DATES From—	DATES To—	Highest grade	Organization (include arm or service)	Duty	Full name and grade of immediate commanding officer

W. D., A. G. O. Form No. 0850
April 22, 1942

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Name [illegible]

(*b*) Were you ever rejected for any branch of the military service _____ or for the R. O. T. C. _____ or C. M. T. C. _____? If so, state when and where rejected and cause _____

(*c*) Service, showing dates of service and highest grade held, in Officers' Reserve Corps (inactive); National Guard of the United States; Enlisted Reserve Corps (inactive); Naval or Marine Corps Reserve Forces (inactive); National Guard or Naval Militia not in Federal service, or in military or naval forces of foreign countries. (State name of foreign country and when service was performed.)

(*d*) Prior service in Coast Guard, Public Health Service, or Coast and Geodetic Survey. Give dates and nature of service _____

(*e*) Were all discharges granted under honorable conditions? _____ Yes _____ No.

(*f*) Have you already established military preference with the Civil Service Commission? _____ Yes _____ No.

If so, check kind of preference below:

_____ Veteran _____ Disabled veteran.

10. Are you now a member of—	*Yes*	*No*
(*a*) National Guard		
(*b*) Officers' Reserve Corps		
(*c*) United States Naval Reserve		
(*d*) Marine Corps Reserve		
(*e*) Coast Guard Reserve		

11. Have you registered under the Selective Service Act? _____ Yes _____ No. If so, give address of local board _____

If classified, give your classification _____ Your order number _____

12. Are you now receiving pay as a retired officer? (Enlisted man)? _____ Yes _____ No.

13. Are you now drawing compensation or other benefits from the Veterans Administration? _____ Yes _____ No. If so, state amount _____

14. Physical condition is: Excellent _____ very good _____ fair _____ poor _____

Height without shoes _____ feet _____ inches. Weight _____ pounds.

15. (*a*) Have you any physical defect or disability whatsoever? _____ Yes _____ No.

(*b*) Have you ever had a nervous breakdown? _____ Yes _____ No.

If your answer to either (*a*) or (*b*) above is yes, give full particulars:

16. Have you ever been turned down for life insurance? _____ Yes _____ No.

17. Do you hold any elective or appointive office, Federal, State, or municipal? _____ Yes _____ No. If so, give details _____

18. Are you *now* employed by the Federal Government? _____ Yes _____ No.

(*a*) If so _____
(Department or agency) (Bureau)

(*b*) If you now are or have ever been so employed, give dates:

From _____ (Month) (Year) to _____ (Month) (Year)

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20. Other experience in management or leadership or any special skills not shown under question 19

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19. *Experience:* In the space furnished below, give a record of important employment, both public and private, which you have had. **Start with your present position and work back to the first position you held.** Describe your field of work and position and give your duties and responsibilities in such detail as to make your qualifications clear.

Present position:

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

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Place _____ (City) _____ (State)
Exact title of position _____

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Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

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PERSONNEL PLACEMENT QUESTIONNAIRE

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20. Other experience in management or leadership or any special skills not shown under question 19 _____

_____

21. In addition to employment in your main field or fields of professional specialization, specify any other qualifications or skills you have acquired through study, civic enterprise, hobbies, construction of instruments, etc. (For example: Photography, aviation, public speaking, civic organizations, cryptanalysis, pigeon training, radio transmission, etc.) Answer specifically (*f*), (*g*), and (*h*) below.

Occupation or skill	Describe work or study
(*a*)	
(*b*)	
(*c*)	
(*d*)	
(*e*)	
(*f*) Experience as an entertainer	
(*g*) Experience as an instructor	
(*h*) Athletic skill	

22. Education (includes military service schools):

(*a*) Circle highest grade completed, elementary or high schools:
1 2 3 4 5 6 7 8 9 10 11 12 Did you graduate? _____ Yes _____ No.

(*b*)	School (name of institution)	Years attended	Graduate? Yes / No } Year	Degrees	Subject majored in
College					
Post-graduate					
Military service school (branch and special)					

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(*c*) Other subjects specialized in _____

_____

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(c) Other subjects specialized in _____

23. Foreign languages (check proficiency).

Language (specify)	Read			Speak			Auditory comprehension		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair

24. Foreign travel and residence:
Indicate specifically the duration, location, and nature of any foreign experience you may have had. (Country and subdivision—Use official name as of 1935.)
Dates of travel or residence _____
Country _____
Purpose and nature _____

25. Describe the work, if any, connected with war activities (including civilian defense) in which you are now engaged _____

26. How many days' advance notice will you require before being available for service? _____

27. State any other limitations which you care to place on your availability _____

28. Have you ever been convicted by a civil or military court? If so, give the date and circumstances. _____

29. Remarks. State any other information you may desire to submit which will be helpful in ascertaining your best field of usefulness _____

Signature _____
(First name) (Middle name) (Last name)
(SIGN ALL NAMES IN FULL)

(Name typed or printed) _____

NOTE.—Do *not* send with this questionnaire valuable personal papers such as *Birth certificate, passports, citizenship papers, discharge certificates, warrants, commissions, original letters of commendation, etc.*, which you desire to be returned to you. As a rule these documents are *unnecessary* for the consideration of your case.

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PERSONNEL PLACEMENT QUESTIONNAIRE

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PERSONNEL PLACEMENT QUESTIONNAIRE

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RATING

Detailed answers should be made as the action taken by the War Department will depend upon the completeness of the information furnished.

Where more space is needed, attach additional sheets.

~~If practicable~~, attach a recent photograph showing on back thereof date it was made

(Print or type answers to questions.) *Boxes in broken lines for use of War Department only*

_____ (Date of application)

1. Name _____ (Last) (First) (Middle)

   Army serial No. (if any) _____

   Mailing address _____ (Number) (Street) (City) (State)

   Legal or voting residence _____ (State) (County)

   Person to be notified in case of emergency:

   Name _____ Relationship _____

   Address _____

2. (*a*) Birth _____ (Date) (Place: State or name of country at time of birth)

   (*b*) Age last birthday _____

3. (*a*) Parental nativity: Country of mother's birth _____

   Country of father's birth _____

   (*b*) If married, country of wife's birth _____

4. State whether or not you are a citizen of the United States and whether by birth or naturalization. (If the latter, append evidence of naturalization. or if evidence not available, state on what date and in what court naturalized.) _____

5. Marital status (indicate by "X"): Single _____ Married _____ Separated _____ Divorced _____ Widowed _____

6. Dependents (number completely dependent on you other than wife) _____

7. Race: White _____ Negro _____ Indian _____ Other (specify) _____

8. In what fields and in what capacity do you consider that you could be of special service to the Government? (List in order of ability.)

FIELD	REASONS

9. (*a*) Chronological statement of service in the Army, Navy, Marine Corps, including service as a cadet at U. S. Military or Naval Academy, National Naval Volunteers, National Guard in Federal service, as a Reserve officer on active duty, or at military training camps, or as a contract surgeon serving full time, or as a student in the C. M. T. C. or R. O. T. C., Basic Course, Advanced Course, and Advanced Course camp, giving inclusive dates for each day, month, and year, if practicable, from your personal records. Do *not* write to War Department for exact data.

DATES From—	DATES To—	Highest grade	Organization (include arm or service)	Duty	Full name and grade of immediate commanding officer

W. D., A. G. O. Form No. 0850a
April 22, 1942

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(*b*) Were you ever rejected for any branch of the military service _____ or for the R. O. T. C. _____ or C. M. T. C. _____? If so, state when and where rejected and cause _____

(*c*) Service, showing dates of service and highest grade held, in Officers' Reserve Corps (inactive); National Guard of the United States; Enlisted Reserve Corps (inactive); Naval or Marine Corps Reserve Forces (inactive); National Guard or Naval Militia not in Federal service, or in military or naval forces of foreign countries. (State name of foreign country and when service was performed.)

(*d*) Prior service in Coast Guard, Public Health Service, or Coast and Geodetic Survey. Give dates and nature of service _____

(*e*) Were all discharges granted under honorable conditions? _____ Yes _____ No.

(*f*) Have you already established military preference with the Civil Service Commission? _____ Yes _____ No.

If so, check kind of preference below:

_____ Veteran _____ Disabled veteran.

10. Are you now a member of—

	Yes	*No*
(*a*) National Guard	_____	_____
(*b*) Officers' Reserve Corps	_____	_____
(*c*) United States Naval Reserve	_____	_____
(*d*) Marine Corps Reserve	_____	_____
(*e*) Coast Guard Reserve	_____	_____

11. Have you registered under the Selective Service Act? _____ Yes _____ No. If so, give address of local board _____

If classified, give your classification _____ Your order number _____

12. Are you now receiving pay as a retired officer? (Enlisted man)? _____ Yes _____ No.

13. Are you now drawing compensation or other benefits from the Veterans Administration? _____ Yes _____ No. If so, state amount _____

14. Physical condition is: Excellent _____ very good _____ fair _____ poor _____

Height without shoes _____ feet _____ inches. Weight _____ pounds.

15. (*a*) Have you any physical defect or disability whatsoever? _____ Yes _____ No.

(*b*) Have you ever had a nervous breakdown? _____ Yes _____ No.

If your answer to either (*a*) or (*b*) above is yes, give full particulars:

16. Have you ever been turned down for life insurance? _____ Yes _____ No.

17. Do you hold any elective or appointive office, Federal, State, or municipal? _____ Yes _____ No. If so, give details _____

18. Are you *now* employed by the Federal Government? _____ Yes _____ No.

(*a*) If so _____
(Department or agency) (Bureau)

(*b*) If you now are or have ever been so employed, give dates:

From _____ to _____
(Month) (Year) (Month) (Year)

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20. Other experience in management or leadership or any special skills not shown under question 19 _____

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19. *Experience:* In the space furnished below, give a record of important employment, both public and private, which you have had. **Start with your present position and work back to the first position you held.** Describe your field of work and position and give your duties and responsibilities in such detail as to make your qualifications clear.

Present position:

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

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Place _____ Exact title of position _____

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Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

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PERSONNEL PLACEMENT QUESTIONNAIRE

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20. Other experience in management or leadership or any special skills not shown under question 19 _____

_____

21. In addition to employment in your main field or fields of professional specialization, specify any other qualifications or skills you have acquired through study, civic enterprise, hobbies, construction of instruments, etc. (For example: Photography, aviation, public speaking, civic organizations, cryptanalysis, pigeon training, radio transmission, etc.) Answer specifically (*f*), (*g*), and (*h*) below.

Occupation or skill	Describe work or study
(*a*) _____	
(*b*) _____	
(*c*) _____	
(*d*) _____	
(*e*) _____	
(*f*) Experience as an entertainer _____	
(*g*) Experience as an instructor _____	
(*h*) Athletic skill _____	

22. Education (includes military service schools):

(*a*) Circle highest grade completed, elementary or high schools:

1 2 3 4 5 6 7 8 9 10 11 12 Did you graduate? _____ Yes _____ No.

(*b*)	School (name of institution)	Years attended	Graduate? Yes / No — Year	Degrees	Subject majored in
College					
Post-graduate					
Military service school (branch and special)					

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(*c*) Other subjects specialized in _____

_____

_____

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(c) Other subjects specialized in _____

23. Foreign languages (check proficiency).

Language (specify)	Read			Speak			Auditory comprehension		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair

24. Foreign travel and residence:
Indicate specifically the duration, location, and nature of any foreign experience you may have had. (Country and subdivision—Use official name as of 1935.)
Dates of travel or residence _____
Country _____
Purpose and nature _____

25. Describe the work, if any, connected with war activities (including civilian defense) in which you are now engaged _____

26. How many days' advance notice will you require before being available for service? _____

27. State any other limitations which you care to place on your availability _____

28. Have you ever been convicted by a civil or military court? If so, give the date and circumstances. _____

29. Remarks. State any other information you may desire to submit which will be helpful in ascertaining your best field of usefulness _____

Signature _____
(First name) (Middle name) (Last name)
(SIGN ALL NAMES IN FULL)

(Name typed or printed) _____

NOTE.—Do *not* send with this questionnaire valuable personal papers such as *Birth certificate, passports, citizenship papers, discharge certificates, warrants, commissions, original letters of commendation, etc.*, which you desire to be returned to you. As a rule these documents are *unnecessary* for the consideration of your case.

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PERSONNEL PLACEMENT QUESTIONNAIRE

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PERSONNEL PLACEMENT QUESTIONNAIRE

DUPLICATE

RATING

Detailed answers should be made as the action taken by the War Department will depend upon the completeness of the information furnished.

Where more space is needed, attach additional sheets.

If practicable, attach a recent photograph showing on back thereof date it was made

(Print or type answers to questions.) Boxes in broken lines for use of War Department only

_____ (Date of application)

1. Name _____ (Last) (First) (Middle)

   Army serial No. (if any) _____

   Mailing address _____ (Number) (Street) (City) (State)

   Legal or voting residence _____ (State) (County)

   Person to be notified in case of emergency:

   Name _____ Relationship _____

   Address _____

2. (*a*) Birth _____ (Date) (Place: State or name of country at time of birth)

   (*b*) Age last birthday _____

3. (*a*) Parental nativity: Country of mother's birth _____

   Country of father's birth _____

   (*b*) If married, country of wife's birth _____

4. State whether or not you are a citizen of the United States and whether by birth or naturalization. (If the latter, append evidence of naturalization. or if evidence not available, state on what date and in what court naturalized.) _____

5. Marital status (indicate by "X"): Single _____ Married _____ Separated _____ Divorced _____ Widowed _____

6. Dependents (number completely dependent on you other than wife) _____

7. Race: White _____ Negro _____ Indian _____ Other (specify) _____

8. In what fields and in what capacity do you consider that you could be of special service to the Government? (List in order of ability.)

FIELD	REASONS

9. (*a*) Chronological statement of service in the Army, Navy, Marine Corps, including service as a cadet at U. S. Military or Naval Academy, National Naval Volunteers, National Guard in Federal service, as a Reserve officer on active duty, or at military training camps, or as a contract surgeon serving full time, or as a student in the C. M. T. C. or R. O. T. C., Basic Course, Advanced Course, and Advanced Course camp, giving inclusive dates for each day, month, and year, if practicable, from your personal records. Do *not* write to War Department for exact data.

DATES From—	DATES To—	Highest grade	Organization (include arm or service)	Duty	Full name and grade of immediate commanding officer

W. D., A. G. O. Form No. 0850a
April 22, 1942

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(*b*) Were you ever rejected for any branch of the military service _____ or for the R. O. T. C. _____ or C. M. T. C. _____? If so, state when and where rejected and cause _____

(*c*) Service, showing dates of service and highest grade held, in Officers' Reserve Corps (inactive); National Guard of the United States; Enlisted Reserve Corps (inactive); Naval or Marine Corps Reserve Forces (inactive); National Guard or Naval Militia not in Federal service, or in military or naval forces of foreign countries. (State name of foreign country and when service was performed.)

_____

(*d*) Prior service in Coast Guard, Public Health Service, or Coast and Geodetic Survey. Give dates and nature of service _____

(*e*) Were all discharges granted under honorable conditions? _____ Yes _____ No.

(*f*) Have you already established military preference with the Civil Service Commission? _____ Yes _____ No.

If so, check kind of preference below:

_____ Veteran _____ Disabled veteran.

10. Are you now a member of—

	Yes	*No*
(*a*) National Guard	_____	_____
(*b*) Officers' Reserve Corps	_____	_____
(*c*) United States Naval Reserve	_____	_____
(*d*) Marine Corps Reserve	_____	_____
(*e*) Coast Guard Reserve	_____	_____

11. Have you registered under the Selective Service Act? _____ Yes _____ No. If so, give address of local board _____

If classified, give your classification _____ Your order number _____

12. Are you now receiving pay as a retired officer? (Enlisted man)? _____ Yes _____ No.

13. Are you now drawing compensation or other benefits from the Veterans Administration? _____ Yes _____ No. If so, state amount _____

14. Physical condition is: Excellent _____ very good _____ fair _____ poor _____

Height without shoes _____ feet _____ inches. Weight _____ pounds.

15. (*a*) Have you any physical defect or disability whatsoever? _____ Yes _____ No.

(*b*) Have you ever had a nervous breakdown? _____ Yes _____ No.

If your answer to either (*a*) or (*b*) above is yes, give full particulars:

_____

16. Have you ever been turned down for life insurance? _____ Yes _____ No.

17. Do you hold any elective or appointive office, Federal, State, or municipal? _____ Yes _____ No. If so, give details _____

_____

18. Are you *now* employed by the Federal Government? _____ Yes _____ No.

(*a*) If so _____
(Department or agency) (Bureau)

(*b*) If you now are or have ever been so employed, give dates:

From _____ to _____
(Month) (Year) (Month) (Year)

16—20211-9

20. Other experience in management or leadership or any special skills not shown under question 19 _____

_____

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19. *Experience:* In the space furnished below, give a record of important employment, both public and private, which you have had. **Start with your present position and work back to the first position you held.** Describe your field of work and position and give your duties and responsibilities in such detail as to make your qualifications clear.

Present position:

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

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Place _____ (City) _____ (State)
Exact title of position _____

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Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

16—20211-3

PERSONNEL PLACEMENT QUESTIONNAIRE

DUPLICATE

RATING

Detailed answers should be made as the action taken by the War Department

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20. Other experience in management or leadership or any special skills not shown under question 19 _____

_____

21. In addition to employment in your main field or fields of professional specialization, specify any other qualifications or skills you have acquired through study, civic enterprise, hobbies, construction of instruments, etc. (For example: Photography, aviation, public speaking, civic organizations, cryptanalysis, pigeon training, radio transmission, etc.) Answer specifically (*f*), (*g*), and (*h*) below.

Occupation or skill	Describe work or study
(*a*)	
(*b*)	
(*c*)	
(*d*)	
(*e*)	
(*f*) Experience as an entertainer	
(*g*) Experience as an instructor	
(*h*) Athletic skill	

22. Education (includes military service schools):

(*a*) Circle highest grade completed, elementary or high schools:
1 2 3 4 5 6 7 8 9 10 11 12 Did you graduate? _____ Yes _____ No.

(*b*)	School (name of institution)	Years attended	Graduate? Yes / No — Year	Degrees	Subject majored in
College					
Post-graduate					
Military service school (branch and special)					

16—26211-3

(*c*) Other subjects specialized in _____

_____

_____

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(c) Other subjects specialized in _____

23. Foreign languages (check proficiency).

Language (specify)	Read			Speak			Auditory comprehension		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair

24. Foreign travel and residence:
Indicate specifically the duration, location, and nature of any foreign experience you may have had. (Country and subdivision—Use official name as of 1935.)
Dates of travel or residence _____
Country _____
Purpose and nature _____

25. Describe the work, if any, connected with war activities (including civilian defense) in which you are now engaged _____

26. How many days' advance notice will you require before being available for service? _____

27. State any other limitations which you care to place on your availability _____

28. Have you ever been convicted by a civil or military court? If so, give the date and circumstances.

29. Remarks. State any other information you may desire to submit which will be helpful in ascertaining your best field of usefulness _____

Signature _____
(First name) (Middle name) (Last name)
(SIGN ALL NAMES IN FULL)

(Name typed or printed) _____

NOTE.—Do *not* send with this questionnaire valuable personal papers such as *Birth certificate, passports, citizenship papers, discharge certificates, warrants, commissions, original letters of commendation, etc.*, which you desire to be returned to you. As a rule these documents are *unnecessary* for the consideration of your case.

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PERSONNEL PLACEMENT QUESTIONNAIRE

DUPLICATE

RATING

Detailed answers should be made as the action taken by the War Department

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REFERENCE SHEET

NEW YORK OFFICER PROCUREMENT DISTRICT, 50 BROADWAY, NEW YORK, N. Y.

Read Instructions on back before completing. Date. . . . . Age. . . . . .

NAME (Last). . . . . .(First). . . . . .(Middle). . . . . .

MAILING ADDRESS. . . . . .(Bus. Phone). . . . . .

PRESENT AND PREVIOUS EMPLOYERS AND BUSINESS ASSOCIATES:

(Name) (Address) (Bus.Phone)

Present. . . . . .

Previous. . . . . .

. . . . . .

OTHER PERSONS FAMILIAR WITH YOUR QUALIFICATIONS AND ABILITIES:

(Name) (Address) (Bus. Phone)

. . . . . .

. . . . . .

. . . . . .

GIVE LIST OF ORGANIZATIONS TO WHICH YOU BELONG:

. . . . . .

. . . . . .

. . . . . .

GIVE NAME AND ADDRESS OF YOUR BANK:

. . . . . .

GIVE THREE (3) ADDITIONAL REFERENCES IN OR NEAR NEW YORK:

(Name) (Address) (Bus.Phone) (Occupation) (Yrs)(Known) (How)(Recently)

1. . . . . .

2. . . . . .

3. . . . . .

EDUCATION:	Name	Years Attended	Graduated Yes or No	Year	Degrees
High School.					
College.					

CIVILIAN EXPERIENCE: (Principal occupation(s) and places employed)

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. . . . . .

. . . . . .

. . . . . .

. . . . . .

. . . . . .

. . . . . .

. . . . . .

. . . . . .

How long in present position. . . . . .Position. . . . . .

Annual average net earnings past 5 years from business. . . . . .Married or Single. . . .

5/18/43

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The Museum of Modern Art Archives, NY	Collection:	Series.Folder:
	MSB	III.F.42

Instructions for Completion of Reference Sheet

1. Typowrite or print answers legibly.

2. Answer all questions accurately.

3. Give telephone number for each reference, that can be reached in business hours.

4. Do not give as reference any relation by blood or marriage.

5. Do give as references persons, other than professional acquaintances, who have known you for a number of years and can certify as to your character and general reputation in your community. Give names of individuals, not names of school, college, hospital, etc.

6. Misstatement or omission of a material fact in completion of any papers may be ground for revocation of your commission, if you are later appointed.

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	MSB	III.F.42

REFERENCE SHEET

NEW YORK OFFICER PROCUREMENT DISTRICT, 50 BROADWAY, NEW YORK, N. Y.

Read Instructions on back before completing. Date. . . . . Age. . . . . .

NAME (Last). . . . . .(First). . . . . .(Middle). . . . . .

MAILING ADDRESS. . . . . .(Bus. Phone). . . . . .

PRESENT AND PREVIOUS EMPLOYERS AND BUSINESS ASSOCIATES:

(Name) (Address) (Bus.Phone)

Present. . . . . .

Previous. . . . . .

. . . . . .

OTHER PERSONS FAMILIAR WITH YOUR QUALIFICATIONS AND ABILITIES:

(Name) (Address) (Bus. Phone)

. . . . . .

. . . . . .

. . . . . .

GIVE LIST OF ORGANIZATIONS TO WHICH YOU BELONG:

. . . . . .

. . . . . .

. . . . . .

GIVE NAME AND ADDRESS OF YOUR BANK:

. . . . . .

GIVE THREE (3) ADDITIONAL REFERENCES IN OR NEAR NEW YORK:

(Name) (Address) (Bus.Phone) (Occupation) (Yrs)(Known) (How)(Recently)

1. . . . . .

2. . . . . .

3. . . . . .

EDUCATION:	Name	Years Attended	Graduated Yes or No	Year	Degrees
High School.					
College.					

CIVILIAN EXPERIENCE: (Principal occupation(s) and places employed)

. . . . . .

. . . . . .

. . . . . .

. . . . . .

. . . . . .

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. . . . . .

. . . . . .

. . . . . .

How long in present position. . . . . .Position. . . . . .

Annual average net earnings past 5 years from business. . . . . .Married or Single. . . .

5/18/43

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The Museum of Modern Art Archives, NY	Collection:	Series.Folder:
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Instructions for Completion of Reference Sheet

1. Typowrite or print answers legibly.

2. Answer all questions accurately.

3. Give telephone number for each reference, that can be reached in business hours.

4. Do not give as reference any relation by blood or marriage.

5. Do give as references persons, other than professional acquaintances, who have known you for a number of years and can certify as to your character and general reputation in your community. Give names of individuals, not names of school, college, hospital, etc.

6. Misstatement or omission of a material fact in completion of any papers may be ground for revocation of your commission, if you are later appointed.

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PERSONNEL PLACEMENT QUESTIONNAIRE

DUPLICATE

RATING

Detailed answers should be made as the action taken by the War Department will depend upon the completeness of the information furnished.
Where more space is needed, attach additional sheets.

If practicable, attach a recent photograph showing on back thereof date it was made

(Print or type answers to questions.) Boxes in broken lines for use of War Department only

_____ (Date of application)

1. Name _____ (Last) (First) (Middle)

Army serial No. (if any) _____

Mailing address _____ (Number) (Street) (City) (State)

Legal or voting residence _____ (State) (County)

Person to be notified in case of emergency:
Name _____ Relationship _____
Address _____

2. (*a*) Birth _____ (Date) (Place: State or name of country at time of birth)
(*b*) Age last birthday _____
3. (*a*) Parental nativity: Country of mother's birth _____
Country of father's birth _____
(*b*) If married, country of wife's birth _____
4. State whether or not you are a citizen of the United States and whether by birth or naturalization. (If the latter, append evidence of naturalization. or if evidence not available, state on what date and in what court naturalized.) _____
5. Marital status (indicate by "X"): Single _____ Married _____ Separated _____ Divorced _____ Widowed _____
6. Dependents (number completely dependent on you other than wife)* _____
7. Race: White _____ Negro _____ Indian _____ Other (specify) _____
8. In what fields and in what capacity do you consider that you could be of special service to the Government? (List in order of ability.)

FIELD	REASONS

9. (*a*) Chronological statement of service in the Army, Navy, Marine Corps, including service as a cadet at U. S. Military or Naval Academy, National Naval Volunteers, National Guard in Federal service, as a Reserve officer on active duty, or at military training camps, or as a contract surgeon serving full time, or as a student in the C. M. T. C. or R. O. T. C., Basic Course, Advanced Course, and Advanced Course camp, giving inclusive dates for each day, month, and year, if practicable, from your personal records. Do *not* write to War Department for exact data.

DATES From—	DATES To—	Highest grade	Organization (include arm or service)	Duty	Full name and grade of immediate commanding officer

W. D., A. G. O. Form No. 0850a
April 22, 1942

16—26211-3

Place _____ (City) (State) Exact title of position _____

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(*b*) Were you ever rejected for any branch of the military service _____ or for the R. O. T. C. _____ or C. M. T. C. _____? If so, state when and where rejected and cause _____

(*c*) Service, showing dates of service and highest grade held, in Officers' Reserve Corps (inactive); National Guard of the United States; Enlisted Reserve Corps (inactive); Naval or Marine Corps Reserve Forces (inactive); National Guard or Naval Militia not in Federal service, or in military or naval forces of foreign countries. (State name of foreign country and when service was performed.)

_____

(*d*) Prior service in Coast Guard, Public Health Service, or Coast and Geodetic Survey. Give dates and nature of service _____

(*e*) Were all discharges granted under honorable conditions? _____ Yes _____ No.

(*f*) Have you already established military preference with the Civil Service Commission? _____ Yes _____ No.
If so, check kind of preference below:
_____ Veteran _____ Disabled veteran.

10. Are you now a member of—

	Yes	*No*
(*a*) National Guard		
(*b*) Officers' Reserve Corps		
(*c*) United States Naval Reserve		
(*d*) Marine Corps Reserve		
(*e*) Coast Guard Reserve		

11. Have you registered under the Selective Service Act? _____ Yes _____ No. If so, give address of local board _____
If classified, give your classification _____ Your order number _____
12. Are you now receiving pay as a retired officer? (Enlisted man)? _____ Yes _____ No.
13. Are you now drawing compensation or other benefits from the Veterans Administration? _____ Yes _____ No. If so, state amount _____
14. Physical condition is: Excellent _____ very good _____ fair _____ poor _____
Height without shoes _____ feet _____ inches. Weight _____ pounds.
15. (*a*) Have you any physical defect or disability whatsoever? _____ Yes _____ No.
(*b*) Have you ever had a nervous breakdown? _____ Yes _____ No.
If your answer to either (*a*) or (*b*) above is yes, give full particulars:
_____
16. Have you ever been turned down for life insurance? _____ Yes _____ No.
17. Do you hold any elective or appointive office, Federal, State, or municipal? _____ Yes _____ No. If so, give details _____
18. Are you *now* employed by the Federal Government? _____ Yes _____ No.
(*a*) If so _____
(Department or agency) (Bureau)
(*b*) If you now are or have ever been so employed, give dates:
From _____ (Month) (Year) to _____ (Month) (Year)

16—26211-3

19. *Experience:* In the space furnished below, give a record of important employment, both public and private, which you have had. **Start with your present posi-**

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19. *Experience:* In the space furnished below, give a record of important employment, both public and private, which you have had. **Start with your present position and work back to the first position you held.** Describe your field of work and position and give your duties and responsibilities in such detail as to make your qualifications clear.

Present position:

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

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Place _____ (City) _____ (State)
Exact title of position _____

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Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

Place _____ (City) _____ (State)
From _____ (Month) (Year) to _____ (Month) (Year)
Name of employer _____
Address _____
Kind of business or organization _____
Number and class of employees you supervised _____
Name and title of your immediate supervisor _____
Reason for leaving _____

Exact title of position _____
Salary: Starting $_____ per _____
Final $_____
Duties and responsibilities _____
Machines and equipment you used _____

16—26211-3

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PERSONNEL PLACEMENT QUESTIONNAIRE

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RATING

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20. Other experience in management or leadership or any special skills not shown under question 19 _____

_____

21. In addition to employment in your main field or fields of professional specialization, specify any other qualifications or skills you have acquired through study, civic enterprise, hobbies, construction of instruments, etc. (For example: Photography, aviation, public speaking, civic organizations, cryptanalysis, pigeon training, radio transmission, etc.) Answer specifically (*f*), (*g*), and (*h*) below.

Occupation or skill	Describe work or study
(*a*)	
(*b*)	
(*c*)	
(*d*)	
(*e*)	
(*f*) Experience as an entertainer	
(*g*) Experience as an instructor	
(*h*) Athletic skill	

22. Education (includes military service schools):

(*a*) Circle highest grade completed, elementary or high schools:

1 2 3 4 5 6 7 8 9 10 11 12 Did you graduate? _____ Yes _____ No.

(*b*)	School (name of institution)	Years attended	Graduate? Yes / No — Year	Degrees	Subject majored in
College					
Post-graduate					
Military service school (branch and special)					

16—26211-3

(*c*) Other subjects specialized in _____

_____

_____

23. Foreign languages (check proficiency)

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(c) Other subjects specialized in _____

_____

_____

23. Foreign languages (check proficiency).

Language (specify)	Read			Speak			Auditory comprehension		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair

24. Foreign travel and residence:
Indicate specifically the duration, location, and nature of any foreign experience you may have had. (Country and subdivision—Use official name as of 1935.)
Dates of travel or residence _____
Country _____
Purpose and nature _____
_____

25. Describe the work, if any, connected with war activities (including civilian defense) in which you are now engaged _____
_____
_____

26. How many days' advance notice will you require before being available for service? _____

27. State any other limitations which you care to place on your availability _____
_____
_____
_____
_____

28. Have you ever been convicted by a civil or military court? If so, give the date and circumstances.
_____
_____

29. Remarks. State any other information you may desire to submit which will be helpful in ascertaining your best field of usefulness _____
_____
_____
_____

Signature _____
(First name) (Middle name) (Last name)
(SIGN ALL NAMES IN FULL)

(Name typed or printed) _____

NOTE.—Do *not* send with this questionnaire valuable personal papers such as *Birth certificate, passports, citizenship papers, discharge certificates, warrants, commissions, original letters of commendation, etc.*, which you desire to be returned to you. As a rule these documents are *unnecessary* for the consideration of your case.

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PERSONNEL PLACEMENT QUESTIONNAIRE

DUPLICATE

Detailed answers should be made as the action taken by the War Department

RATING